

EXHIBIT - L

DeAngelo Agency, Inc.
 2 Campion Rd
 New Hartford, NY 13413-6203
 Phone: 315-768-7900 Fax: 315-768-8474

M E M O			Page 1
ACCOUNT NO.	COPIES	DATE	
JANEA-1	MO	09/18/2007	
POLICY INFORMATION			
POLICY			
I-680-1792C044-TIA-07			
TYPE	EFFECTIVE	EXPIRATION	
PCKG	10/15/2007	10/15/2008	

Jane A. Halbritter
 100 W Garden Street
 Rome, NY 13440

Dear Ms. Halbritter:

Re: Commercial Package Policy

We are pleased to enclose the renewal of your Commercial Package Policy, effective 10-15-07, with Travelers Ins. Co.

Please review and feel free to contact us anytime.

Thank you,


 Mark Owens/Comm. Accts.

AGENT

ASSOCIATED NY INS AGCS
2 CAMPION ROAD
NEW HARTFORD NY 13413

00546


TRAVELERS

This envelope includes:

- Your auto renewal policy
- Your auto insurance identification card(s)
- Other important notices

JANE A HALBRITTER
100 W GARDEN ST
ROME NY 134403424

Dear Policyholder:

Your New York State Insurance Identification Cards are enclosed. Your automobile insurance card indicates that your policy provides at least the minimum coverage required by law.

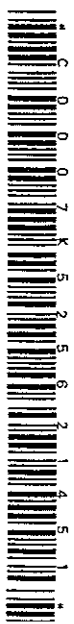
If you are ever involved in an accident, you should report it to your agent or a Travelers claim office as soon as possible. Each ID card contains the information you will need, including the telephone numbers for reaching the nearest Travelers claim office, when reporting an accident or claim. But only use these numbers to report accident claims. Call your Travelers agent for all other insurance matters.

If you suspect FRAUD on any policy or claim, call Travelers 24-hour hotline (800)-6-FRAUD-0. Help us fight fraud.

NEW YORK ID CARD IMPORTANT NOTICE

New York Part 32 Regulation, Section 32.12(b) requires Insurers to provide the following important insurance information for Policyholders:

- Financial security (insurance) shall be maintained without interruption during the entire registration period regardless of whether the vehicle is driven.
- License plates must be surrendered before insurance is cancelled or suspended without exception. This is in compliance with NYS law. Surrendering license plates before cancellation of insurance will prevent communications from DMV based on cancellation that insurers are required by law to report to DMV.
- Policyholders moving from NYS must coordinate the surrender of NYS license plates and cancellation of a NYS insurance policy with obtaining a new registration and insurance policy in another State. Again, this will prevent DMV communications based on cancellation reported by insurers.
- Insurers must provide policyholders with at least two identical ID cards for each vehicle insured. ID cards represent that insurance is provided for the named insured and the described vehicle, as applicable, as of the effective date shown thereon.



NEW YORK STATE INSURANCE IDENTIFICATION CARD

Policy Number: 978883442 101 2

TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA

Effective Date: 12/07/2007

NAME AND ADDRESS OF ISSUER: AGENT: OFK525

Expiration Date: 12/07/2008

P.O. BOX 4831, SYRACUSE, NY, 132214831

12:01 a. m.

An authorized NEW YORK insurer has issued an Owner's Policy of Liability Insurance complying with Article 6 (Motor Vehicle Financial Security Act) of the NEW YORK Vehicle and Traffic Law to:

(Not acceptable to obtain registration after 45 days from effective date.) Applicable with respect to the following Motor Vehicle:

2006 BMW

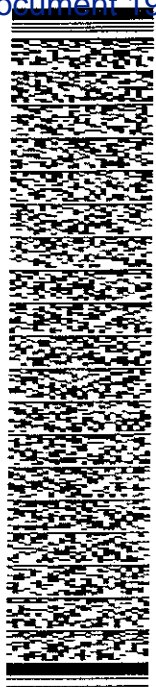
HALBRITTER, JANE

Year Make

100 W GARDEN ST
ROME NY 134403424

WBAEK134X6CN76140
Vehicle Identification Number

RENEWAL



REPLACEMENT VEHICLE NOTATION:
DMV WILL ONLY PROCESS A
VEHICLE CHANGE (RE-REGISTRATION)
USING THE REPLACED VEHICLES
CURRENT REGISTRATION.
See Important Notice
On Reverse Side FS-20
Rev. 8-01

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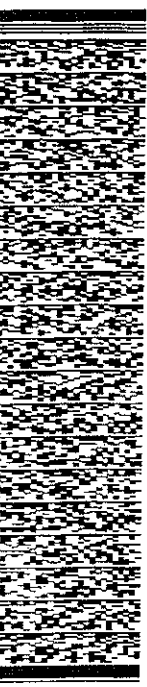
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ROME NY 134403424

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STOP DON'T PEEL STICKER FROM FRONT - SEE BACK!

Keep this document to show to the police and courts.

259297BV



08/07/09

8

WP0CA2985XU627908
1999 PORSC CONV
CPL9560 PAS 9

09



NEW YORK STATE REGISTRATION DOCUMENT

PAS
CPL9560
1999 PORSC NONTRANSFERABLE
CONV WH WP0CA2985XU627908
2506 G 6 I2345847 NOV 29 2007
WEB WEBCDA

Expires 08/07/09

HALBRITTER, JANE, A
100 W GARDEN ST
ROME NY

16.00
13440 ANNUAL CHG
AMT PAID INCL ADD CHG

259297BV VOID IF ALTERED EXCEPT FOR ADDRESS 32.00



V0000075

STOP DON'T PEEL STICKER FROM FRONT - SEE BACK!

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259298BV



12/21/09

12

SALSF25496A921031
2006 LA/RO 4DSD
DMK5128 PAS 2

09



NEW YORK STATE REGISTRATION DOCUMENT

PAS
DMK5128
2006 LA/RO NONTRANSFERABLE
4DSD WH SALSF25496A921031
5606 G 8 I2345866 NOV 29 2007
WEB WEBCDA

Expires 12/21/09

HALBRITTER, JANE, A
100 W GARDEN ST
ROME NY

43.00
13440 ANNUAL CHG
AMT PAID INCL ADD CHG

259298BV VOID IF ALTERED EXCEPT FOR ADDRESS 86.00





ASSOCIATED NY INS AGCS
2 CAMPION ROAD
NEW HARTFORD NY 13413
00546

TRAVELERS 

JANE A HALBRITTER
100 W GARDEN ST
ROME NY 134403424

TRAVELERS 

AUTOMOBILE POLICY CONTINUATION DECLARATIONS

1. Named Insured

JANE A HALBRITTER
100 W GARDEN ST
ROME NY 134403424

Your Agency's Name and Address

ASSOCIATED NY INS AGCS
2 CAMPION ROAD
NEW HARTFORD NY 13413

Your Policy Number : 978883442 101 2
Your Account Number: B00544283

For Policy Service Call 315-768-7900
For Claim Service Call 1-800-CLAIM33

2. Your Total Premium for the Policy Period is \$570.00.
The policy period is from December 7, 2007 to June 7, 2008.

3. Your Vehicles

Identification Numbers

1 2006 BMW 650 CIC

WBAEK134X6CN76140

4. Coverages, Limits of Liability and Premiums

Insurance is provided only where a premium is shown for the coverage.

1

06 BMW
650 CIC

A	- Bodily Injury \$250,000 each person \$500,000 each accident	\$ 76
B	- Property Damage \$100,000 each accident	57
C	- Medical Payments \$10,000 each person	2
D	- Supplementary Uninsured/ Underinsured Motorists \$100,000 each person \$300,000 each accident See Endorsement A31042 See Important Message	23
E	- Collision Actual Cash Value less \$1,000 deductible	225



Named Insured: JANE A HALBRITTER
Policy Number: 978883442 101 2
Policy Period: December 7, 2007 to June 7, 2008.
Issued On: November 7, 2007

5. Information Used to Rate Your Policy (continued)

Discounts Included in Your Premium

- \$40.00 Anti Theft 06 BMW 650 CIC
- \$18.00 Anti Lock Brake 06 BMW 650 CIC
- \$16.00 Passive Restraint 06 BMW 650 CIC
- \$245.00 Multiple Cars
- \$55.00 Account Discount

Surcharges Included in Your Premium

- + \$89.00 Accidents and/or Traffic Violations Listed Below:

Accidents 08/25/05
 JANE

Drivers

Drivers	Date of Birth	Sex	Marital Status
JANE	07-22-52	Female	Single
GEORGE	08-28-87	Male	Single

Vehicles

Vehicles	Use of Vehicle	Class Code	Location of Vehicle
06 BMW 650 CIC	Pleasure	5951	ROME NY

It is important that the above information is correct to ensure that your policy is properly rated. If there are errors or changes to this information, please notify your Travelers representative immediately.

6. Other Information

Loss Payees

06 BMW 650 CIC
 VIN # WBAEK134X6CN76140

FINANCIAL SERV VEH TRUST
 INS SERV CNTR PO BOX 390902
 MINNEAPOLIS, MN 55439

DeAngelo Agency, Inc.
2 Campion Rd
New Hartford, NY 13413-6203
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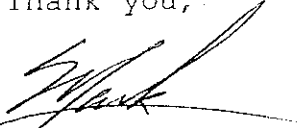
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